

EXHIBIT A



Automated Wire Transfer Request

Customer Information

*Customer Name *Phone# (xxx-xxx-xxxx) Extn

Authorized Representative
(if applicable):

(The individual communicating the wire instructions on behalf of a business or
Attorney in Fact/Agent.)

*Photo *ID#

Issued By Issue Date (mm-dd-yyyy) Expiration Date (mm-dd-yyyy)

Additional ID Type (if applicable)
 ID#

Issued By Issue Date (mm-dd-yyyy) Expiration Date (mm-dd-yyyy)

Transaction Information

Entry Operator: J042757

Payment Amount Currency

Date

Debit Party

<input type="text" value="D-DDA"/> <input type="button" value="▼"/>	Account Number <input type="text" value="2378"/>
	Full Name <input type="text" value="BEVERLY CHIN-TAM"/>
	Street address <input type="text" value="PETER TAM"/>
	City, State, Zipcode <input type="text" value="483 WELLESLEY ST"/>
	<input type="text" value="WESTON"/> <input type="text" value="MA 024932600"/>

NOTE: If Wire Transfer Form contains a P.O. Box as customer address, verify physical address on file.

Houne

Beneficiary

<input type="checkbox"/> Not On Us <input checked="" type="checkbox"/>	Account Number	2968
Full Name Street address City, State, Zipcode		
JJ CONSTRUCTION AND DESIGN INC		

*Beneficiary
Phone# (xxx-xxx-xxxx) [REDACTED] 5976

Final Beneficiary Bank

A-ABA <input checked="" type="checkbox"/>	Routing Number	9593
Bank Name Street Address City, State, Zipcode		
BANK OF AMERICA, N.A., NY		
NEW YORK, NY		

Bank to Bank Information

[REDACTED]

Originator to Beneficiary Information

[REDACTED]
[REDACTED]
[REDACTED]

Client Acknowledgement

I have received, read, and understand the Automated Wire Transfer Request Form - Terms and Conditions. I acknowledge and certify to the accuracy of all the information contained herein and agree to pay the applicable fee plus correspondent bank charges, if any.

Customer signature _____

(use if two signatures are required)

Branch representative: Reagan Carlson (No initials)
(Name)Branch#: 779 Branch Phone #: 781-891-1500Date: 4/14/23 Reference # 00009477

I have verified the customer to the identification indicated above

(Banker's handwritten initials and E#)

Wires \$18K USD or greater fax to CWC 1.866.666.0132 (CT, MA, NH, RI, VT) or 1.888.666.0134 (DE, MI, NJ, NY, OH, PA)

Photo copy: provide one copy to the customer and keep original signed by customer in branch file designated for wire requests.

Citizens Private Client Money Market for XXXXX-237-8 Continued**TRANSACTION DETAILS FOR PERSONAL MONEY MARKET ACCOUNT ENDING 237-8****Withdrawals & Debits *******May include checks that have been processed electronically by the payee/merchant.*

Date	Amount	Description	Previous Balance
04/14	200,000.00	OUTGOING WIRE TRANSFER (MTS NO.230414009477)	308,474.40
Other Withdrawals & Debits			Total Withdrawals & Debits
			- 243,183.00

Interest

Date	Amount	Description	Total Interest Paid
05/11	37.74	INTEREST	+ 37.74

Daily Balance

Date	Balance	Date	Balance	Date	Balance	= Current Balance
04/14	108,474.40	04/18	85,291.40	05/08	65,291.40	
04/17	103,474.40	04/28	75,291.40	05/11	65,329.14	

NEWS FROM CITIZENS